

SENDER: COMPLETE		CERTIFIED MAIL	
<small>PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS FOLD AT DOTTED LINE</small>			
<p>■ Complete items 1, 2, item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>			
1. Article Addressed to: <i>Menneth L. Lawson # 04-70-061 FCI Morgantown P.O. Box 1000 Morgantown, WV 26507</i>		X <i>S. Dan Ilo</i> Agent <input checked="" type="checkbox"/> <input type="checkbox"/> Addressee B. Received by (Printed Name) C. Date of Delivery <i>S. Dan Ilo</i> <i>3-19-10</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.			
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes			
2. Article Number <small>(Transfer from service label)</small>		<i>107-MC-021-SJD DN14</i> 7002 3150 0000 8388 8740	
PS Form 3811, August 2001		Domestic Return Receipt	
102595-02-M-1540			